

**FORM ORG** (Rev. 5/2012)

13 MAY 30 P6:22



## HAWAII STATE ETHICS COMMISSION ORGANIZATION'S EXPENDITURES AND CONTRIBUTIONS REPORT STATE OF HAWAII STATE ETHICS COMMISSION

REP	ORT YEAR: 2013	Amended Stateme	ent			
For L	obbying Reporting Period: Januar	y 1 - last day of February	March 1 - April 30	May May	1 - December 31	
ORG	ANIZATION INFORMATION				<del></del>	
Ulu	pono Initiative		Murray Clay			
Orga	nization Name		Contact Person			
737	Bishop Street, Suite 2350					
Pac	ific Guardian Center, Mauka	Tower				
Maili	ng Address (Number and Street or P.	O. Box)				
	rolulu		HI		96813	
City			State		Zip Code	
(80	3) 544-8960	,	onoinitiative.com			
Tele	phone Extension	Email Address				
PAR	T I. TOTAL EXPENDITURES					
1	Preparation & Distribution of Lobb	urina Matariala		4	Total Amount 0.00	
2	Media Advertising				0.00	
	_			3	0.00	
3 4	Postage Paid to Lobbyiste	Attached Additional Shoot	s As Needed)		0.00	
7	Compensation Paid to Lobbyists (Attached Additional Sheets As Needed)  List the names of all lobbyists and compensation paid to lobbyists during the statement period					
	Lobbyist Name		Compensation Paid			
			_ ~	.63.43		
				68.17		
	c. Kyle Datta			250.40		
	D. Murray Clay			61.50		
	E. Robbie Dingeman		_ E3	309.48		
	F		_ F	<u>.</u>		
	G. Total from Additional Attached She	et(s)	G	<u></u>		
	Add lines A through G		Total Compensation	Paid ► 4	2,952.98	
5	Fees Paid to Consultants (other th	nan to Lobbyists)		5	0.00	
6	Entertainment & Events				0.00	
7	Receptions, Meals, Food & Bever	ages		7	0.00	
8	Gifts				1,600.00	
9	Loans			9	. 0.00	
10	Other Disbursements		·	10	0.00	
	Add lines 1 through 10		Total Expend	itures ▶	4,552.98	

•	OR MORE PER PERSON PE the purpose of lobbying of \$25 or more	ER DAY  per person per day during the statemer	nt period.	
Name & Address			Amount or Value	
· · · · · · · · · · · · · · · · · · ·				
Check here if additi	onal sheets are attached			
	TURES OF \$150 OR MORE P	PER PERSON of \$150 or more per person during the	statement period.	
ame & Address			Amount or Value	
Check here if addition	onal sheets are attached			
ART II. CONTRIBUTION		n of \$25 or more per person during the s	statement period.	
ame & Address	,	, , , , ,	Amount or Value	
<u> </u>				
<del></del>				
Check here if addition	onal sheets are attached			
ART III. SUBJECT ARE		orted or opposed during the statement p	eriod:	
Agriculture	Education	Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation	
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other (indicate below):	
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections		
nereby certify that the stater	ments made above are correct and	d complete to the best of my knowle	edge	
91 1	4 1/2	51	(28/2013	
gnature of Authorized Person (	//		00/ 0 12	
- Murray Clay		Managing Partner		
rint Name		Title		